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J C WRAY

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PTO/SB/21 (09-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

2

Application Number	10/602,281
Filing Date	6/24/03
First Named Inventor	Young, William
Art Unit	
Examiner Name	

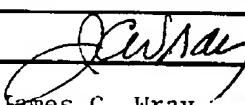
Attorney Docket Number

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
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<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
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<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
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Remarks		

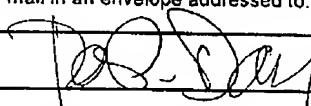
Request for Withdrawal
as Attorney or Agent

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Law Offices of James C. Wray		
Signature			
Printed name	James C. Wray		
Date	7/26/07	Reg. No.	22,693

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature	
Typed or printed name	Roxana P. Day
Date	7/26/07

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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

Application Number	10/602,281
Filing Date	6/24/03
First Named Inventor	William Young
Art Unit	
Examiner Name	
Attorney Docket Number	

**To: Commissioner for Patents
P.O. Box 1450
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Please withdraw me as attorney or agent for the above identified patent application, and

all the attorneys/agents of record.
 the attorneys/agents (with registration numbers) listed on the attached paper(s), or
 the attorneys/agents associated with Customer Number 000049801

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

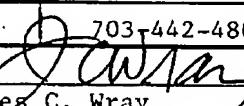
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<input checked="" type="checkbox"/> Firm or Individual Name	Law Offices of James C. Wray		
Address	1493 Chain Bridge Road, Suite 300		
City	McLean	State	VA
Country	USA		
Telephone	703-442-4800	Email	jcwray@starpower.net
Signature			
Name	James C. Wray	Registration No.	22,693
Date	7/26/07	Telephone No.	703-442-4800

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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